Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NORTH CAROLINA	_	
Case number (if known)	_ Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Shakema	
	your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your	First name	First name
		Samone	
		Middle name	Middle name
		Lynch	
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	,	
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal		
	Individual Taxpayer Identification number (ITIN)	xxx-xx-6521	

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Debtor 1 Shakema Samone Lynch

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	6034 Fox Hall Village Rd	If Debtor 2 lives at a different address:
		Raleigh, NC 27616  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Wake	
County		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known)

Tell the Court About Your Bankruptcy Case 7. Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. When Case number District When District Case number When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When District Case number, if known Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. □ No. residence? Has your landlord obtained an eviction judgment against you? Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Debtor 1

Shakema Samone Lynch

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Debtor 1 Shakema Samone Lynch Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). Code. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or Where is the property? livestock that must be fed, or a building that needs urgent repairs? Number, Street, City, State & Zip Code

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Debtor 1 Shakema Samone Lynch

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Shakema Samone Lynch Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ■ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million ■ \$0 - \$50.000 □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Shakema Samone Lynch Signature of Debtor 2 Shakema Samone Lynch Signature of Debtor 1 Executed on Executed on January 8, 2019 MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Shakema Samone Lynch Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Daniel T. C	oleman	Date	January 8, 2019	
Signature of Atto	rney for Debtor		MM / DD / YYYY	
	.=			
Daniel T. Cole	man 15812			
Printed name				
Law Office of	Daniel T. Coleman			
Firm name				
4030 Wake Fo	rest Rd., Ste 300			
Raleigh, NC 2	7609			
Number, Street, City, S	State & ZIP Code			
Contact phone 91	9-881-9988	Email address	devay@bellsouth.net	
15812 NC				
Bar number & State				

U	טכ ו	
	1/08/19	9:43AM

-:11	in this inform	-4: 4- :-				1/08/19 9:43AM
		ation to identify your				
Der	otor 1	Shakema Samon First Name	Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
` `		kruptcy Court for the:	EASTERN DISTRICT (	DF NORTH CAROLINA		
		.,,				
	se number					Check if this is an
					á	amended filing
~.	<del>.</del> .	4000				
		m 106Sum	and Liabilities a	ad Cartain Statistical Information		40/45
				nd Certain Statistical Information e are filing together, both are equally responsible	or sur	12/15
info	rmation. Fill o	ut all of your schedul	es first; then complete t	he information on this form. If you are filing amen k the box at the top of this page.		
Par	t 1: Summa	rize Your Assets				
						our assets alue of what you own
1.	Schedule A/	B: Property (Official F	orm 106A/B)		\$	0.00
			•		\$	
	1c. Copy line	63, Total of all propert	y on Schedule A/B		\$	20,022.00
Par	t 2: Summa	rize Your Liabilities				
						our liabilities mount you owe
2.			laims Secured by Property mn A, Amount of claim, at	/ (Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	24,176.00
3.			Unsecured Claims (Official 1) (priority unsecured clair	al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured of	claims) from line 6j of Schedule E/F	\$	108,208.83
				Your total liabilities	\$	132,384.83
Par	t 3: Summa	rize Your Income and	Evnansas			
			-			
4.	Copy your co		e from line 12 of Schedule	ə I	\$	1,772.40
5.		Your Expenses (Official onthly expenses from li			\$	3,825.00
Par	t 4: Answer	These Questions for	Administrative and Stat	istical Records		
6.	-		er Chapters 7, 11, or 13? on this part of the form. C	heck this box and submit this form to the court with y	our oth	er schedules.
7.	Yes What kind of	debt do you have?				
				debts are those "incurred by an individual primarily fo	r a pers	sonal, family, or
		bts are not primarily t with your other sched		ve nothing to report on this part of the form. Check th	is box a	and submit this form to

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Debtor 1 Shakema Samone Lynch

Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$\_\_\_\_\_5,488.85

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total o	claim
1 Tolli 1 art 4 on Schedule L/I , copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	81,716.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	81,716.00

								1/08/19 9:43AI
Fill in t	his inforn	mation to identify your	case and	d this filing:				
Debtor	1	Shakema Samon	e Lvnch					
		First Name		liddle Name	Last Name			
Debtor		-						
(Spouse,	if filing)	First Name	М	liddle Name	Last Name			
United	States Ba	nkruptcy Court for the:	EASTE	RN DISTRICT O	F NORTH CAROLINA			
Cooon	umbor						_	01 1 1 11 11 1
Case n	umber _							Check if this is an amended filing
								amenaea ming
Offic	ial Fo	rm 106A/B						
Sch	edul	e A/B: Prop	ertv					12/15
					once. If an asset fits in more than o	and actoriony list the sec	ot in the	
informat	ion. If more every ques	e space is needed, attach tion.	a separat	te sheet to this for	ed people are filing together, both a m. On the top of any additional pag e You Own or Have an Interest In			
4 Dayı			- :	in any realdenes	huilding land as similar property?			
1. DO YO	u own or h	iave any legal or equitabl	e mterest	iii aiiy residence,	building, land, or similar property?			
■ No	. Go to Par	t 2.						
☐ Ye	s. Where is	s the property?						
	1							
Part 2:	Describe	Your Vehicles						
□ No	)	ucks, tractors, sport u	<b>y</b>	,				
3.1 I	Make:	GMC		Who has an inte	rest in the property? Check one	Do not deduct secur	ed claims	s or exemptions. Put
	_	Terrain		_	rest in the property? Check one	the amount of any se		aims on Schedule D: Secured by Property.
		2015		■ Debtor 1 only ■ Debtor 2 only				
	Approximat		1196	Debtor 1 and [	Debtor 2 only	Current value of the entire property?		urrent value of the ortion you own?
	Other inforn			_	f the debtors and another			,
					is community property	\$13,122.0	)0	\$13,122.00
L				(see instructions	5)			
Exam  No □ Ye  5 Add .pag	nples: Boa oes I the dolla es you ha	ts, trailers, motors, pers	onal wate you own . Write th	ercraft, fishing ves for all of your e nat number here	nal vehicles, other vehicles, an ssels, snowmobiles, motorcycle a entries from Part 2, including an entries from Part 2 including and the following items?	accessories  by entries for	Cur	\$13,122.00
DO you	A OWIT OF I	iave any legal of equit	abie iiile	rest in any or th	ic ronowing items :			tion you own?
							Do r	not deduct secured
							clair	ns or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

D	ebtor 1	Shakema Sa	amone Lynch	Case number (if kno	1/08/19 9:43AN <i>wn)</i>
	Yes.	Describe	<u> </u>		
			Household furniture including couch, beds, dresser		\$1,500.00
			Kitchen items including dishes and silverware		\$100.00
			Washer and Dryer		\$100.00
7.	□ No	les: Televisions a	and radios; audio, video, stereo, and digital equipment; computers I phones, cameras, media players, games	, printers, scanners; mus	sic collections; electronic devices
			Multiple televisions		\$300.00
	■ No □ Yes.  Equipm	other collection  Describe  ent for sports a les: Sports, photo	ographic, exercise, and other hobby equipment; bicycles, pool table		
	■ No □ Yes.	musical instr	uments		
10	■ No		s, shotguns, ammunition, and related equipment		
11	□ No		othes, furs, leather coats, designer wear, shoes, accessories		
			Personal Apparel		\$750.00
12	□ No		welry, costume jewelry, engagement rings, wedding rings, heirloo	om jewelry, watches, gen	ns, gold, silver
			Watches, earings, necklaces		\$200.00
13	Exam <sub>i</sub> ■ No	arm animals bles: Dogs, cats, Describe	birds, horses		
14	■ No	her personal an	d household items you did not already list, including any hea	alth aids you did not lis	t

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Official Form 106A/B Schedule A/B: Property page 2

Case 19-00070-5-DMW Doc 1 Filed 01/08/19 Entered 01/08/19 09:44:59 Page 12 of 56 Debtor 1 Shakema Samone Lynch Case number (if known) Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,950.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ■ No Institution name: ☐ Yes..... 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts □ No Institution or issuer name: ■ Yes..... \$108.00 **Fidelity Brokerage Account** 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: **ESPP** Hill ROM ESPP Plan - Managed by Fidelity \$22.00 401 (k) Fidelity 401k Account 90417 \$3,173.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. .....

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No

☐ Yes...... Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

Official Form 106A/B Schedule A/B: Property page 5

	Case 1	.9-00070-5-DMW	Doc 1 Filed 01/0	8/19 Entered 01/08/19 0	9:44:59	Page 15 of 56 1/08/19 9:43AM
Fill	l in this info	rmation to identify your	case:			
De	btor 1	Shakema Samon	e Lynch			
_	h ( 0	First Name	Middle Name	Last Name		
	btor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States E	Sankruptcy Court for the:	EASTERN DISTRICT OF N	ORTH CAROLINA		
Ca	se number					
	nown)					Check if this is an amended filing
$\sim$	ficial E	arm 1060				3
		orm 106C		_		
S	chedu	le C: The Pr	operty You Cla	im as Exempt		4/16
the nee case For spe any func exe	property you ded, fill out a e number (if each item coific dollar applicable ds—may be mption to a	listed on Schedule A/B: Ind attach to this page as known).  of property you claim as amount as exempt. Alterstatutory limit. Some exunlimited in dollar amo	Property (Official Form 106A/B) many copies of Part 2: Addition exempt, you must specify the ratively, you may claim the femptions—such as those for unt. However, if you claim an	together, both are equally responsible as your source, list the property that your Page as necessary. On the top of a e amount of the exemption you claim fair market value of the property health aids, rights to receive certain exemption of 100% of fair market very is determined to exceed that amounts of the property	ou claim as ex ny additional p m. One way of being exempt n benefits, an alue under a l	empt. If more space is pages, write your name and doing so is to state a led up to the amount of d tax-exempt retirement aw that limits the
Pa	rt 1: Iden	tify the Property You Cla	aim as Exempt			
1.	Which set	of exemptions are you o	laiming? Check one only, eve	n if your spouse is filing with you.		
	■ You are	claiming state and federa	nonbankruptcy exemptions.	11 U.S.C. § 522(b)(3)		
	☐ You are	claiming federal exemptio	ns. 11 U.S.C. § 522(b)(2)			
2.	For any pro	operty you list on Sched	lule A/B that you claim as exe	empt, fill in the information below.		
		otion of the property and lir B that lists this property	e on Current value of the portion you own	Amount of the exemption you claim	Specific la	ws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.		
		Terrain 34196 miles	\$13,122.00	<b>\$3,500.00</b>	N.C. Gei	n. Stat. §

Schedule A/B that lists this property	portion you own		· ·	·
	Copy the value from Check only one box for each exemption. Schedule A/B			
2015 GMC Terrain 34196 miles Line from Schedule A/B: 3.1	\$13,122.00		\$3,500.00	N.C. Gen. Stat. § 1C-1601(a)(3)
Ellie Hoff Geriedale PAB. G11			100% of fair market value, up to any applicable statutory limit	10 100 (4)(0)
Household furniture including couch, beds, dresser	\$1,500.00		\$1,500.00	N.C. Gen. Stat. § 1C-1601(a)(4)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Kitchen items including dishes and silverware	\$100.00		\$100.00	N.C. Gen. Stat. § 1C-1601(a)(4)
Line from Schedule A/B: 6.2			100% of fair market value, up to any applicable statutory limit	
Washer and Dryer Line from Schedule A/B: 6.3	\$100.00		\$100.00	N.C. Gen. Stat. § 1C-1601(a)(4)
Ellie Hoff Geriedale PAB. 414			100% of fair market value, up to any applicable statutory limit	
Multiple televisions Line from Schedule A/B: 7.1	\$300.00		\$300.00	N.C. Gen. Stat. § 1C-1601(a)(4)
Line from Goriedule AVD. 111			100% of fair market value, up to any applicable statutory limit	

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btor 1 Si	nakema Samone Lynch			Case number (if known)	
	cription of the property and line on A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	al Apparel n Schedule A/B: 11.1	\$750.00		\$750.00	N.C. Gen. Stat. § 1C-1601(a)(4)
Line non	ii Scredule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
•	Brokerage Account	\$108.00		\$108.00	N.C. Const. Art. X § 1
Line iron	ii Scriedule A/B. 16.1			100% of fair market value, up to any applicable statutory limit	
	Hill ROM ESPP Plan -	\$22.00		\$22.00	N.C. Const. Art. X § 1
_	naged by Fidelity e from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
Health 230251	Savings Account with Fidelity	\$647.00		\$647.00	N.C. Gen. Stat. § 1C-1601(a)(2)
	n Schedule A/B: <b>35.1</b>			100% of fair market value, up to any applicable statutory limit	
	es, earings, necklaces	\$200.00		\$200.00	N.C. Gen. Stat. § 1C-1601(a)(4)
Line non	in Goriedate 7V E.			100% of fair market value, up to any applicable statutory limit	
	v 401k Account 90417	\$3,173.00		\$3,173.00	N.C. Gen. Stat. § 1C-1601(a)(9)
Line non	in Goriedate 7V E.			100% of fair market value, up to any applicable statutory limit	
	claiming a homestead exemption to adjustment on 4/01/19 and every			led on or after the date of adjustmer	nt.)
	s. Did you acquire the property covere	ed by the exemption w	ithin 1	,215 days before you filed this case	?
	No Yes				
	169				

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Rev. 3/2016

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NORTH CAROLINA

IN THE MATTER OF: **Shakema Samone Lynch** Debtor(s). CASE NUMBER:

#### SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

- I, <u>Shakema Samone Lynch</u>, claim the following property as exempt pursuant to 11 U.S.C. § 522 and the laws of the State of North Carolina, and nonbankruptcy Federal law: (Attach additional sheets if necessary).
- 1. NCGS 1C-1601(a)(1) (NC Const., Article X, Section 2) REAL OR PERSONAL PROPERTY USED AS A RESIDENCE OR BURIAL PLOT (The exemption is not to exceed \$35,000; however, an unmarried debtor who is 65 years of age or older is entitled to retain an aggregate interest in the property not to exceed \$60,000 in value so long as the property was previously owned by the debtor as a tenant by the entireties or as a joint tenant with rights of survivorship and the former co-owner of the property is deceased, in which case the debtor must specify his/her age and the name of the former co-owner, if a child use initials only, of the property below).

Description of Property and Address	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Mortgage Holder or Lien Holder	Amount of Mortgage <u>or Lien</u>	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(1)
-NONE-						
Debtor's Age: Name of former co-owne	er:					

\_\_\_\_

VALUE OF REAL ESTATE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(1): \$ 0.00

2. NCGS 1C-1601(a)(3) MOTOR VEHICLE (The exemption in one vehicle is not to exceed \$3,500).

Model, Year Style of Auto	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	<u>Lien Holder</u>	Amount of <u>Lien</u>	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(3)
2015 GMC Terrain 34196 miles	13,122.00		Santander Consumer USA	21,357.00	0.00	3,500.00

VALUE OF MOTOR VEHICLE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(3): \$ 3,500,00

3. NCGS 1C-1601(a)(4) (NC Const., Article X, Section 1) PERSONAL OR HOUSEHOLD GOODS (The debtor's aggregate interest is not to exceed \$5,000 plus \$1,000 for each dependent of the debtor, not to exceed \$4,000 total for dependents). The number of dependents for exemption purposes is 3.

Description of Property	Market <u>Value</u>	Lien <u>Holder</u>	Amount of Lien	Net <u>Value</u>	Claimed as Exempt Pursuant to NCGS 1C-1601(a)(4)
Household furniture including couch, beds, dresser	1,500.00			1,500.00	1,500.00
Kitchen items					
including dishes and silverware	100.00			100.00	100.00
Multiple televisions	300.00			300.00	300.00
Personal Apparel	750.00			750.00	750.00
Washer and Dryer	100.00			100.00	100.00
Watches, earings, necklaces	200.00			200.00	200.00

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(4): \$ 2.950.00

4. NCGS 1C-1601(a)(5) TOOLS OF TRADE (The debtor's aggregate interest is not to exceed \$2,000 in value).

		Owner				
		(D1)Debtor 1				
	Market	(D2)Debtor 2	Lien	Amount of	Net	Value Claimed as Exempt
<u>Description</u>	<u>Value</u>	(J)Joint	<u>Holder</u>	<u>Lien</u>	<u>Value</u>	Pursuant to NCGS 1C-1601(a)(5)

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Description	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien <u>Holder</u>	Amount of <u>Lien</u>	Net <u>Value</u>	
-NONE-						

#### VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(5): \$ 0.00

5. NCGS 1C-1601(a)(6) LIFE INSURANCE (NC Const., Article X, Section 5).

Description\Insured\Last Four Digits of Policy Number\Beneficiary(if child, initials only)	Cash Value
-NONE-	

6. NCGS 1C-1601(a)(7) PROFESSIONALLY PRESCRIBED HEALTH AIDS (For Debtor or Debtor's Dependents, no limit on value).

Description
-NONE-

7. NCGS 1C-1601(a)(8) COMPENSATION FOR PERSONAL INJURY, INCLUDING COMPENSATION FROM PRIVATE DISABILITY POLICIES OR ANNUITIES, OR COMPENSATION FOR DEATH OF A PERSON UPON WHOM THE DEBTOR WAS DEPENDENT FOR SUPPORT. COMPENSATION NOT EXEMPT FROM RELATED LEGAL, HEALTH OR FUNERAL EXPENSE.

Description AND Source of Compensation, Including Name (If child, initials only) & Last Four Digits of Account Number of any Disability Policy/Annuity -NONE-

8. NCGS 1C-1601(a)(2) ANY PROPERTY (Debtor's aggregate interest in any property is not to exceed \$5,000 in value of any unused exemption amount to which the debtor is entitled under NCGS 1C-1601(a)(1)).

Description of Property and Address	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien <u>Holder</u>	Amount of Lien	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(2)
Health Savings Account with Fidelity 230251584	647.00				647.00	647.00

#### VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(2): \$ 647.00

9. NCGS 1C-1601(a)(9) and 11 U.S.C. § 522 INDIVIDUAL RETIREMENT PLANS & RETIREMENT FUNDS, as defined in the Internal Revenue Code, and any plan treated in the same manner as an individual retirement plan, including individual retirement accounts and Roth retirement accounts as described in §§ 408(a) and 408A of the Internal Revenue Code, individual retirement annuities as described in § 408(b) of the Internal Revenue Code, accounts established as part of a trust described in § 408(c) of the Internal Revenue Code, and funds in an account exempt from taxation under § 401, 403, 408, 408A, 414, 457, or 510(a) of the Internal Revenue Code. For purposes of this subdivision, "Internal Revenue Code" means Code as defined in G.S. 105-228.90.

Type of Account\Location of Account\Last Four Digits of Account Number

Fidelity 401k Account 90417

10. NCGS 1C-1601(a)(10) FUNDS IN A COLLEGE SAVINGS PLAN, as qualified under § 529 of the Internal Revenue Code, and that are not otherwise excluded from the estate pursuant to 11 U.S.C. §§ 541(b)(5)-(6), (e), not to exceed a cumulative limit of \$25,000. If funds were placed in a college savings plan within the 12 months prior to filing, the contributions must have been made in the ordinary course of the debtor's financial affairs and must have been consistent with the debtor's past pattern of contributions. The exemption applies to funds for a child of the debtor that will actually be used for the child's college or university expenses.

 $\underline{\textbf{College Savings Plan} \\ \textbf{Last Four Digits of Account Number} \\ \textbf{Value} \\ \textbf{Initials of Child Beneficiary} \\ \textbf{Savings Plan} \\ \textbf{Last Four Digits of Account Number} \\ \textbf{Value} \\ \textbf{Number} \\ \textbf{Value} \\ \textbf{Number} \\ \textbf{$ 

-NONE-

11. NCGS 1C-1601(a)(11) RETIREMENT BENEFITS UNDER THE RETIREMENT PLANS OF OTHER STATES AND GOVERNMENTAL UNITS OF OTHER STATES (The debtor's interest is exempt only to the extent that these benefits are exempt under the laws of the state or governmental unit under which the benefit plan is established).

Name of Retirement Plan\State Governmental Unit\Last Four Digits of Identifying Number

-NONE-

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12. NCGS 1C-1601(a)(12) ALIMONY, SUPPORT, SEPARATE MAINTENANCE, AND CHILD SUPPORT PAYMENTS OR FUNDS THAT HAVE BEEN RECEIVED OR TO WHICH THE DEBTOR IS ENTITLED (The debtor's interest is exempt to the extent the payments or funds are reasonably necessary for the support of the debtor or any dependent of the debtor).

Type of Support\Amount\Location of Funds	
-NONE-	

13. TENANCY BY THE ENTIRETY. The following property is claimed as exempt pursuant to 11 U.S.C. § 522 and the law of the State of North Carolina pertaining to property held as tenants by the entirety.

Description of	Market	Lien	Amount	Net
Property and Address	<u>Value</u>	<u>Holder</u>	<u>of Lien</u>	<u>Value</u>
-NONE-				

VALUE CLAIMED AS EXEMPT: \$ 0.00

14. NORTH CAROLINA PENSION FUND EXEMPTIONS

1		
	-NONE-	
	-NUNC-	
	11411=	

15. OTHER EXEMPTIONS CLAIMED UNDER LAWS OF THE STATE OF NORTH CAROLINA

a.	Constitutional personal property ("wild card") exemption, N.C. Const. Art. X § 1	22.00
b.	Constitutional personal property ("wild card") exemption, N.C. Const. Art. X § 1	108.00

16. FEDERAL PENSION FUND EXEMPTIONS

-NONE-	

17. OTHER EXEMPTIONS CLAIMED UNDER NONBANKRUPTCY FEDERAL LAW

-NONE-	

- 18. RECENT PURCHASES
- (a). List tangible personal property purchased by the debtor within ninety (90) days of the filing of the bankruptcy petition.

Description	Market <u>Value</u>	Lien <u>Holder</u>	Amount of Lien	Net <u>Value</u>
-NONE-				

(b). List any tangible personal property from 18(a) that is directly traceable to the liquidation or conversion of property that may be exempt and that was not acquired by transferring or using additional property.

Description of Replacement Property	Description of Property Liquidated or Converted that May Be Exempt

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- 19. The debtor's property is subject to the following claims:
- Of the United States or its agencies as provided by federal law. a.
- Of the State of North Carolina or its subdivisions for taxes, appearance bonds or fiduciary bonds; b.
- Of a lien by a laborer for work done and performed for the person claiming the exemption, but only as to the specific property affected. C.
- d. Of a lien by a mechanic for work done on the premises, but only as to the specific property affected.
- For payment of obligations contracted for the purchase of specific real property affected. e.
- For contractual security interests in specific property affected; provided, that the exemptions shall apply to the debtor's household goods f. notwithstanding any contract for a nonpossessory, nonpurchase money security interest in any such goods.
- For statutory liens, on the specific property affected, other than judicial liens. g.
- For child support, alimony or distributive award order pursuant to Chapter 50 of the General Statutes of North Carolina. h.
- For criminal restitution orders docketed as civil judgments pursuant to G.S. 15A-1340.38. i.
- Debts of a kind specified in 11 U.S.C. § 523(a)(1) (certain taxes), (5) (domestic support obligations). į.
- Debts of a kind specified in 11 U.S.C. § 522(c). k.

Shakema Samone Lynch

Claimant	Nature of Claim	Amount of Claim	Description of Property	Value of Property	Net <u>Value</u>
-NONE-					

None of the property listed in paragraph 18(a), except qualified replacement property under 18(b), has been included in this claim of exemptions.

None of the claims listed in paragraph 19 is subject to this claim of exemptions.

I declare that to the extent any exemptions I have claimed appear on its face to exceed the amount allowed by the applicable statute, I claim only the maximum amount allowed by statute.

#### UNSWORN DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF INDIVIDUAL TO SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

l,	Shakema Samone Lynch, declare und	der penalty of perjury that I have read the foregoing Schedule C-1 - Property Claimed as
Exempt, consis	ting of 4 sheets, and that they are true and con	rrect to the best of my knowledge, information and belief.
Executed on:	January 8, 2019	/s/ Shakema Samone Lynch
		Shakema Samone Lynch

Debtor

					1/00/19 9.43AII
Fill in this informa	ation to identify you	r case:			
Debtor 1	Shakema Samo	ne I vnch			
Debtor 1	First Name	Middle Name Last Name		-	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name Last Name		-	
United States Ban	kruptcy Court for the:	EASTERN DISTRICT OF NORTH CAROLINA	Δ		
Office Otates Dail	Kruptcy Court for the.	ENCIENT DICTRICT OF NORTH OF NOETH		-	
Case number					
(if known)				☐ Check	if this is an
				ameno	led filing
o	4000				
Official Form	106D				
Schedule I	D: Creditors	Who Have Claims Secured	l by Propert	У	12/15
is needed, copy the number (if known).		If two married people are filing together, both are equout, number the entries, and attach it to this form. On			
	•		u baya nathina alaa t	to ronart on this form	
ino. Check	this box and submit ti	nis form to the court with your other schedules. Yo	ou nave nothing else	to report on this form.	
Yes. Fill in a	all of the information	below.			
Part 1: List All	Secured Claims				
2. List all secured c	laims. If a creditor has r	more than one secured claim, list the creditor separately	Column A	Column B	Column C
for each claim. If mo	re than one creditor has	a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
much as possible, lis	t the claims in alphabeti	cal order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Fidelity Inv	estments	Describe the property that secures the claim:	\$2,000.00	\$4,000.00	\$0.00
Creditor's Name		401k			
		As of the date you file, the claim is: Check all that			
		apply.			
Boston, M	A 02109	☐ Contingent			
Number, Street, 0	City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who owes the deb	ot? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		An agreement you made (such as mortgage or sect	ured		
Debtor 2 only		car loan)			
☐ Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the	e debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this cla community deb		Other (including a right to offset)			
Date debt was incu	October	Last 4 digits of account number 0417			
Date debt was incu		Last 4 digits of account number			
O O Drommoodin	l.aasima	Describe the manner to that account the eleium	<b>\$040.00</b>	¢400.00	¢740.00
2.2 Progressiv	e Leasing	Describe the property that secures the claim:	\$819.00	\$100.00	\$719.00
Orealtor 3 Marrie		Queen size matress			
10619 Sout	th Jordan				
Gateway S		As of the date you file, the claim is: Check all that			
	lan, UT 84095	apply.  Contingent			
	City, State & Zip Code	■ Unliquidated			
Number, Street, C	City, State & Zip Code	☐ Disputed			
Who owes the deb	ot? Check one.	Nature of lien. Check all that apply.			
_		_	urad		
Debtor 1 only		<ul> <li>An agreement you made (such as mortgage or sector car loan)</li> </ul>	urea		
Debtor 2 only	stor 2 only	·			
Debtor 1 and Deb	•	Statutory lien (such as tax lien, mechanic's lien)			
_	e debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this cla community deb		Other (including a right to offset)			
Januarity web	· <del>-</del>				
Date debt was incur	rred June 2018	Last 4 digits of account number 2696			

Official Form 106D

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Debtor 1 Shakema Samone Lynch			Case number (if known)				
	First Name	Middle N	lame Last Name				
2.3	Santander Co	nsumer		***		•	
2.3	USA		Describe the property that secures the claim	n: \$21,35°	7.00	\$13,122.00	\$8,235.00
	Creditor's Name		2015 GMC Terrain 34196 miles				
	P.O. Box 9612 Fort Worth, TX		As of the date you file, the claim is: Check all apply.  Contingent	that			
	Number, Street, City, S	State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one. Disputed  Nature of lien. Check all that apply.							
_	ebtor 1 only		☐ An agreement you made (such as mortgage car loan)	e or secured			
	ebtor 1 and Debtor 2	2 only	Statutory lien (such as tax lien, mechanic's lien)				
ПА	t least one of the deb	otors and another	☐ Judgment lien from a lawsuit				
	heck if this claim re community debt	elates to a	Other (including a right to offset)				
Date	debt was incurred	October 1, 2017	Last 4 digits of account number 5	943			
		•	Column A on this page. Write that number here	: ;	\$24,176.0	0	
	his is the last page	•	the dollar value totals from all pages.		\$24,176.0	0	

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

C	ase 19-00	אואוע-5-טואוא	DOC 1	Filed 01/08	5/19 EIILE	erea 01/08/19 (	J9.44.59	Page 23 01 30 1/08/19 9:43AM
Fill in t	this information	on to identify your o	ase:					
Debtor	1 5	Shakema Samone	Lynch					
20210.	-	irst Name	Middle N	ame	Last Name		_	
Debtor		*					_	
(Spouse i	if, filing) F	irst Name	Middle N	ame	Last Name			
United	States Bankru	ptcy Court for the:	EASTERN I	DISTRICT OF NO	ORTH CAROLI	NA	_	
Case n	umber							
(if known)				_				Check if this is an
								amended filing
Offici	al Form 1	06E/E						
		Creditors W	ho Have	Unsecured	d Claime			12/15
						Part 2 for araditors with	NONDRIODITY	laims. List the other party to
eft. Atta	ch the Continua d case number	ation Page to this page (if known).	e. If you have i	no information to r				entries in the boxes on the Iditional pages, write your
		Your PRIORITY Unsave priority unsecured						
	No. Go to Part 2	• •	i ciaiiiis agaiii	st you!				
	No. Go to Part 2 Yes.	-						
		Your NONPRIORIT	Y Unsecured	l Claims				
		ave nonpriority unsec						
_	-	othing to report in this pa	_		th your other sche	adules		
		aming to roport in this pe	art. Gubrint tino	ionii to the court wit	ar your outor con	duioo.		
•	Yes.							
uns	ecured claim, lis n one creditor ho	t the creditor separately	for each claim.	. For each claim liste	ed, identify what t		list claims already	than one nonpriority included in Part 1. If more he Continuation Page of
								Total claim
4.1	Capital One	e Bank		Last 4 digits of ac	ccount number	5980		\$333.00
	Nonpriority Cre				1.41	M 0047		
	•	al One Bank A 22102-3407		When was the de	ot incurred?	May 2017		
	Number Street	City State Zlp Code		As of the date you	u file, the claim i	s: Check all that apply		
	Who incurred	the debt? Check one.						
	Debtor 1 on	lly		☐ Contingent				
	Debtor 2 on	ıly		☐ Unliquidated				
	Debtor 1 an	d Debtor 2 only		☐ Disputed				
	☐ At least one	of the debtors and ano	ther	Type of NONPRIC	ORITY unsecured	d claim:		
	☐ Check if th debt	is claim is for a comm	nunity	Student loans	-1			
		ıbject to offset?		□ Obligations arise report as priority class.		ration agreement or divo	orce that you did no	JU
	■ No					g plans, and other simila	r debts	
	Yes			Other. Specify	Consumer	Purchase		
				-1 - 2)				

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Debto	Shakema Samone Lynch	Case number (if known)				
4.2	Carolina Finance	Last 4 digits of account number 1695	\$6,588.00			
	Nonpriority Creditor's Name 1513 Walnut St., Ste 150 Cary, NC 27511	When was the debt incurred? Dec. 2015				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed				
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Car loan - voluntary reposession				
	Chisholm Chiropractic Center Nonpriority Creditor's Name	Last 4 digits of account number	\$813.00			
	301 Glenwood Avenue, Ste. 200 Raleigh, NC 27613 Number Street City State Zlp Code	When was the debt incurred? 2016  As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only  □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed				
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No □ Yes	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Chiropractic Services				
	<b>1</b> 163	Other: Specify				
4.4	CreditOne Bank Nonpriority Creditor's Name PO Box 60500	Last 4 digits of account number 5287  When was the debt incurred? June 2018	\$547.00			
	City of Industry, CA 91716-0500  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				

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Debto	1 Shakema Samone Lynch	Case number (if known)						
4.5	Duke Health	Last 4 digits of account number	3070	\$254.83				
	Nonpriority Creditor's Name 5213 S. Alston Durham, NC 27713	When was the debt incurred?	10/02/2018	Ψ234.03				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply					
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	Other. Specify Emergency	medical services					
4.6	First Premier Bank	Last 4 digits of account number	7800	\$540.00				
	Nonpriority Creditor's Name 601 S. Minnesota Ave	When was the debt incurred?	Sept 2017	<b></b>				
	Sioux Falls, SD 57104  Number Street City State Zlp Code	s: Check all that apply						
	Who incurred the debt? Check one.	3. Officer all that apply						
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not						
	Is the claim subject to offset?	report as priority claims						
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	Other. Specify Consumer	Purchases					
4.7	National General Insurance	Last 4 digits of account number	9676	\$200.00				
	Nonpriority Creditor's Name 5630 University Pkwy	When was the debt incurred?	July 2018					
	Winston Salem, NC 27105  Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.	, i.e. c. i.i.e auto <b>,</b> cu i.i.e, i.i.e c.i.i.i.	or onook all that apply					
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only							
	Debtor 1 and Debtor 2 only	_ '						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	No	Debts to pension or profit-sharing plans, and other similar debts						
	☐ Yes							
	<b>⊔</b> 162	Other, Specify Insurance						

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Debtor	1 Shakema Samone Lynch	Case number (if known)					
4.8	Navient	Last 4 digits of account number	6487	\$81,716.00			
	Nonpriority Creditor's Name PO Box 9500	When was the debt incurred?	Sept 2016				
	Wilkes Barre, PA 18773  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes	Other Specify					
	<b>1</b> 163	Student Lo	an				
4.9	Piedmont Finance CNCC	Last 4 digits of account number	737X	\$11,678.00			
	Nonpriority Creditor's Name 5101 New Bern Ave Raleigh, NC 27610	When was the debt incurred?	July 1, 2013				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Car loan - \	/oluntary reposession				
4.1	Verizon Wireless	Last 4 digits of account number	4679	\$2,366.00			
	Nonpriority Creditor's Name PO Box 660108	When was the debt incurred?	July 2017				
	Dallas, TX 75266-0108  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	O continuent					
	Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed					
	Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	d claim:					
	☐ Check if this claim is for a community	Check if this claim is for a community					
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes	■ Other Specify Cell phone					

Debtor 1	Shakema	a Samone Lynch		Case nu	ımber (if known)		
!	Zoca Loan		Last 4 digits of account number	er 7851			\$3,173.00
! :		l147 earch Park Dr.	When was the debt incurred?	July	2018		
ī		City State Zlp Code the debt? Check one.	As of the date you file, the claim	m is: Check	all that apply		
	■ Debtor 1 or	nlv	☐ Contingent				
	Debtor 2 or	•	☐ Unliquidated				
	_	nd Debtor 2 only	☐ Disputed				
		e of the debtors and another	Type of NONPRIORITY unsecu	red claim:			
		nis claim is for a community	☐ Student loans				
•	debt	ubject to offset?	Obligations arising out of a sereport as priority claims	eparation ag	reement or divorc	e that you did not	
1	No		Debts to pension or profit-sha	ring plans,	and other similar o	debts	
	☐ Yes		Other Specify Personal	Loan			
Part 3:	List Other	rs to Be Notified About a De	bt That You Already Listed				
is trying have m	g to collect from	om you for a debt you owe to so	about your bankruptcy, for a debt tha omeone else, list the original creditor at you listed in Parts 1 or 2, list the ac or submit this page.	in Parts 1	or 2, then list the	collection agency here.	Similarly, if you
	d Address		On which entry in Part 1 or Part 2 did y		•		
•	Accounts		Line 4.3 of (Check one):			ority Unsecured Claims	
	ox 140065 Ile, TN 372	14		Part 2:	Creditors with Nor	priority Unsecured Claims	
	,		Last 4 digits of account number				
	d Address oint Collect	Resources	On which entry in Part 1 or Part 2 did y Line <b>4.7</b> of ( <i>Check one</i> ):	_	•	ority Unsecured Claims	
	oz 26140			Part 2:	Creditors with Nor	priority Unsecured Claims	
Greens	sboro, NC 2	27402-6140	Last 4 digits of account number				
	d Address		On which entry in Part 1 or Part 2 did y	ou list the o	riginal creditor?		
	ns & Roge ox 110564	rs, PA - V. Monroe	Line 4.2 of (Check one):			ority Unsecured Claims	
	n, NC 2770	q		Part 2:	Creditors with Nor	priority Unsecured Claims	
	, 110 2770		Last 4 digits of account number				
Troy Ca	d Address apital, LLC	Blvd # D104,	On which entry in Part 1 or Part 2 did y Line 4.2 of ( <i>Check one</i> ):	☐ Part 1:	Creditors with Price	ority Unsecured Claims	
	gas, NV 89			Part 2:	Creditors with Nor	priority Unsecured Claims	
			Last 4 digits of account number				
Part 4:	Add the A	mounts for Each Type of U	nsecured Claim				
	ne amounts of unsecured cl		ims. This information is for statistica	I reporting		-	mounts for each
	6a.	Domestic support obligation	s	6a.	\$	0.00	
	otal ims	Domestic Support Obligation	•	oa.	Ψ	0.00	
from Pa		Taxes and certain other debt	s you owe the government	6b.	\$	0.00	
	6c.		injury while you were intoxicated	6c.	\$	0.00	
	6d.	Other. Add all other priority uns	secured claims. Write that amount here	. 6d.	\$	0.00	
	6e.	Total Priority. Add lines 6a thr	ough 6d.	6e.	\$	0.00	
					Tota	al Claim	
	6f.	Student loans		6f.	\$	81,716.00	
To	otal						

De

from Part 2

ebtor 1	Shakem	a Samone	<b>Lync</b>
clain	ns		

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

6h.

Other. Add all other nonpriority unsecured claims. Write that amount

6j. Total Nonpriority. Add lines 6f through 6i. Case number (if known)

6g.	\$ 0.00
6h.	\$ 0.00
6i.	\$ 26,492.83

108,208.83

Official Form 106 E/F

1/08/19	9:43AN

Fill in this infor	mation to identify your	case:		
Debtor 1	Shakema Samon	e Lynch		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F NORTH CAROLINA	
Case number				
(if known)				

## Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Foxhall Village 5909 Foxhall Village Rd Raleigh, NC 27616	Residential apartment lease. End date 1-31-2019
2.2	NPRTO South-East, LLC 256 West Data Drive Draper, UT 84020	Lease with purchase option for matress and base
2.3	Xstream Travel Suite 245 101 C North Greenville Allen, TX 75002	Travel for birthday celebration

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					1/08/19 9:43AM
Fill in this	information to identify your	case:			
Debtor 1	Shakema Samon	e I vnch			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name		
	,				
United Sta	ites Bankruptcy Court for the:	EASTERN DISTRICT C	F NORTH CAROLINA		
Case num	ber				
(if known)				_	eck if this is an
				ame	ended filing
Officia	I Form 106H				
Sched	lule H: Your Cod	ebtors			12/15
	1010 111 1001 000	0.010			12/10
fill it out, a your name		boxes on the left. Attach . Answer every question	n the Additional Page to	on. If more space is needed, copy the this page. On the top of any Addition as a codebtor.	
_	,	,	·		
■ No	_				
☐ Yes	5				
	hin the last 8 years, have you a, California, Idaho, Louisiana			y? (Community property states and terrington, and Wisconsin.)	ritories include
■ No.	Go to line 3.				
☐ Yes	s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form	e 2 again as a codebtor only	f that person is a guaran	tor or cosigner. Make s	if your spouse is filing with you. List sure you have listed the creditor on S 6G). Use Schedule D, Schedule E/F, o	Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom Check all schedules that apply:	you owe the debt
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	_
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		
3.2	Name			Schedule D, line	
	INGILIO			☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line	_
=	Newsbar				
	Number Street				

State

City

ZIP Code

Fill	in this information to idea	ntify your ca	ase:								
Del	btor 1 Sha	akema Sa	mone Lynch			_					
	btor 2					_					
Uni	ited States Bankruptcy C	ourt for the	EASTERN DISTRICT	OF NORTH CAROLI	NA						
	se number						□ Ar		nt showing	postpetition of	hapter
0	fficial Form 10	61					_			nowing date.	
	chedule I: Yo		ome				IVII	M / DD/ Y	Y Y Y		12/15
sup spo atta	as complete and accura plying correct informat use. If you are separate ch a separate sheet to the tt 1:  Describe Em	ion. If you ed and you this form. (	are married and not filion r spouse is not filing wi	ng jointly, and your sith you, do not include	spouse i de infor	is liv matio	ing with yon about	ou, incluyour spo	ide inform use. If mo	ation about y	our eeded,
1.	Fill in your employme information.	ent		Debtor 1				Debtor 2	or non-fili	ing spouse	
	If you have more than		Employment status	■ Employed				☐ Emplo	yed		
	attach a separate page information about addit		Employment status	☐ Not employed				☐ Not er	mployed		
	employers.		Occupation								
	Include part-time, seas self-employed work.	onal, or	Employer's name	Hill-Rom Manufa	acturin	g					
	Occupation may includ or homemaker, if it app		Employer's address	1069 State Rd 4 Batesville, IN 47							
			How long employed to	here?							
Pai	rt 2: Give Details	About Mon	thly Income								
	mate monthly income a	as of the da		you have nothing to re	eport for	any I	ine, write	\$0 in the	space. Incl	ude your non-	filing
	ou or your non-filing spou e space, attach a separa			ombine the information	n for all e	emplo	oyers for t	hat perso	n on the lin	es below. If yo	ou need
							For Deb	tor 1	For Deb non-filin	tor 2 or ng spouse	
2.			ry, and commissions (becalculate what the month)		2.	\$	2,2	224.27	\$	N/A	
3.	Estimate and list mor	nthly overti	me pav.		3	+\$		0.00	<b>+</b> \$	N/A	

2,224.27

\$

N/A

Calculate gross Income. Add line 2 + line 3.

Copy line 4 here	Deb	tor 1	Shakema Samone Lynch	-		Case	e number ( <i>if knov</i>	vn)					
List all payroll deductions:						Fo	r Debtor 1						
S.   List all payroll deductions:   Sa   Tax, Medicare, and Social Security deductions   Sa   Tax, Medicare, and Social Security deductions   Sa   Sa   Ca4,72   Sa   N/A		Con	ov line 4 here	4.		\$	2.224.2	7		i-iiiiig s	•		
Sa.   Tax. Medicare, and Social Security deductions   Sa.   S.   224.72   \$ N/A			<b>7</b>			-	2,22712	<u>.                                    </u>	· –			4//	
55.   Mandatory contributions for retirement plans   55.   5.   0.00   \$   N/A	5.	List	all payroll deductions:										
56. Voluntary contributions for retirement plans 56. Required repayments of retirement fund loans 56. Required repayments of retirement fund loans 56. Domestic support obligations 57. Domestic support obligations 58. Union dues 59. Union dues 59. Union dues 59. Voluments of the deductions. Specify: Medical Pretax 59. Volter deductions. Volter Specify: Medical Pretax 59. Volter deductions. Volter Specify: Medical Pretax 59. Volter deductions. Volter Specify: Medical Pretax 59. Volter Specify: Medical Pretax Specify: Medical Pretax Specify: Medical Pretax Specify: Medical Pretax		5a.	Tax, Medicare, and Social Security deductions	58	а.	\$	224.7	72	\$		ı	N/A	
56. Required repayments of retirement fund loans 56. Insurance 56. Insurance 56. Insurance 56. Insurance 57. Union dues 58. Union dues 58. Union dues 58. Union dues 59. Union dues 59. Union dues 59. Social Security Roth IRA 50. Other deductions. Specify: Medical Pretax 50. Social Security Roth IRA 50. Other deductions. Specify: Medical Pretax 50. Social Security Roth IRA 50. Other deductions. Specify: Medical Pretax 50. Social Security 80. N/A 80. Author description of the security of the security receives 81. Other deductions. Specify: Medical Pretax 81. Calculate total monthly take-home pay. Subtract line of from line 4. To \$ 1,772.40 \$ N/A 80. Engloyee Life 80. Add the payroll deductions. Add lines 5a+5b+5c+5d+5d+5g+5h. 8. \$ 455.87 \$ N/A 81. List all other income regularly received: 81. Not income from rental property and from operating a business, profession, or farm Attach a statement for each property and from operating a business, profession, or farm Attach a statement for each property and susiness showing gross 82. Family support bayments that you, a non-filling spouse, or a dependent regularly receive settlement, and property settlement for each property and from operating a business, profession, or farm Attach a statement for each property and from operating a business, profession, or farm Attach a statement for each property and from operating a business, profession, or farm Attach a statement for each property and from operating a business expenses, and the total monthly net income. 83. Not income from rental property and from operating a business for the state of the form filling spouse, or a dependent regularly receive 84. Social Security 85. Oncomplement compensation 86. Social Security 86. Oncomplement compensation 87. Author Assistance Program) or housing subsidies. 88. Social Security 89. Author Assistance Program) or housing subsidies. 89. Social Security 80. Other monthly income. Add line 7 + line 9. 81. Other power man assistance and the value (if known) of any non-cash assistance has subs		5b.	Mandatory contributions for retirement plans	5b	٥.	\$	0.0	00	\$_			N/A	
56.   Insurance   56.   \$ 0.00   \$ N/A		5c.	Voluntary contributions for retirement plans	50	Э.	\$	0.0	00	\$			N/A	
50. Domestic support obligations 59. Union dues 59. So, So, Olos \$ N/A 59. Other deductions. Specify: Medical Pretax 59. \$ 0.00 \$ N/A ESAP Roth IRA 8 \$ 21.46 \$ N/A 401K pretax 8 \$ 21.46 \$ N/A 401K pretax 9 \$ 20.00 \$ N/A 401K loan 9 \$ 8.92 \$ N/A 401K loan 9 \$ 1.65 \$ N/A 401K loan 10 \$ 1.772.40 \$ N/A 401K loan 10 \$ 1.772.40 \$ N/A 401K loan		5d.	Required repayments of retirement fund loans	50	d.	\$	0.0	00	\$			N/A	
Sp.   Union dues   Sp.		5e.	Insurance	56	Э.	\$	0.0	00	\$_			N/A	
Sh. Other deductions. Specify:   Medical Pretax		5f.	Domestic support obligations	5f		\$	0.0	00	\$			N/A	
ESAPP Roth IRA \$ 21.46 \$ N/A 401K pretax \$ 21.46 \$ N/A HSA \$ 21.46 \$ N/A HSA \$ 20.00 \$ N/A Dental PreTax \$ 10.04 \$ N/A Legal Insurance \$ 9.00 \$ N/A Vision Pretax \$ 10.04 \$ N/A Vision Pretax \$ 6.66 \$ N/A Employee Life \$ 1.66 \$ 1.87 Vol Dependant Life Vol Dependant Life \$ 1.772.40 \$ N/A  Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 1,772.40 \$ N/A  List all other income regularly received:  8. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8. List all other income.  8. Interest and dividends 8. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimory, spousal support, child support, maintenance, divorce settlement, and property settlement.  8. Unemployment compensation 8. Social Security 8. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8. Other government assistance that you regularly receive 10.00 \$ N/A  8. Other government assistance that you regularly receive 10.00 \$ N/A  8. Other government assistance that you regularly receive 10.00 \$ N/A  8. Other government assistance that you for supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8. 0.00 \$ N/A  9. Add all other income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  10. \$ 1,772.40 + \$ N/A \$ \$ 1,772.40  Combined  Combined		5g.	Union dues	50	g.	\$	0.0	00	\$_			N/A	
Roth IRA 401K pretax		5h.	Other deductions. Specify: Medical Pretax	5h	า.+	\$	102.5	58	+ \$ _			N/A	
## ADITY OF THE TRANS SENTING			ESAPP			\$	21.4	16	\$_			N/A	
HSA Dental PreTax Legal Insurance \$ 10.04 S N/A Legal Insurance \$ 10.04 S N/A Legal Insurance \$ 10.04 S N/A H/A Legal Insurance \$ 10.04 S N/A H/A Legal Insurance \$ 10.00 S N/A H/A H/A Legal Insurance \$ 10.00 S N/A Legal Insurance S 10.00 S N/A Employee Life S 10.92 S N/A Vol Dependant Life S 10.92 S N/A  Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. C alculate total monthly take-home pay. Subtract line 6 from line 4. Calculate total monthly take-home pay. Subtract line 6 from line 4. Calculate total monthly take-home pay. Subtract line 6 from line 4. Calculate total monthly take-home pay. Subtract line 6 from line 4. Calculate total monthly take-home pay. Subtract line 6 from line 4. Calculate total monthly take-home pay. Subtract line 6 from line 4. Calculate total monthly take-home pay. Subtract line 6 from line 4. Calculate total monthly take-home pay. Subtract line 6 from line 4. Calculate total monthly take-home pay. Subtract line 6 from line 4. Calculate otal assistance to ach property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8a. \$ 0.00 S N/A  8b. \$ 0.00 S N/A  8b. \$ 0.00 S N/A  8c. \$ 0.00 S N/A  8d. Interest and dividends 8d. \$ 0.00 S N/A  8d. Unemployment compensation 8d. \$ 0.00 S N/A  8e. Social Security 8e. \$ 0.00 S N/A  8e. Social Security 8e. \$ 0.00 S N/A  8h. S 0.00 S N/A  8h.			Roth IRA			\$	21.4	16	\$_			N/A	
Dental PreTax Legal Insurance 401K loan Vision Pretax Employee Life \$ 9.00 \$ N/A Vision Pretax \$ 6.66 \$ N/A Vision Pretax Employee Life \$ 1.65 \$ N/A Vision Pretax \$ 1.65 \$ N/A Vision Pretax Employee Life \$ 1.772.40 \$ N/A  Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 1,772.40 \$ N/A  Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 1,772.40 \$ N/A  Substituting Pretax Employee Life Sa. Net income regularly received: Sa. Net income from rental property and from operating a business, presion prometation of the form line 4. Substituting Pretax Employee Life Include allmonty, spousal support, child support and the total monthly net income. Substituting Property settlement. Subst			401K pretax			\$	21.4	16	\$_			N/A	
Legal Insurance 401K loan			HSA			\$	20.0	00	\$			N/A	
Vision Pretax   \$ 6.66 \$ N/A			Dental PreTax			\$	10.0	)4	\$			N/A	
Vision Pretax   \$ 6.96 \$ N/A   Employee Life   \$ 4.55 \$ N/A   \$ Vol Dependant Life   \$ 0.92 \$ N/A   \$ N/A   \$ 0.92 \$ N/A			Legal Insurance			\$	9.0	00	\$			N/A	
Employee Life Vol Dependant Life S			401K loan	_		\$	8.8	92	\$			N/A	
Vol Dependant Life  Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5i+5g+5h.  Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5i+5g+5h.  Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5i+5g+5h.  List all other income regularty received:  8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8d. \$ 0.00 \$ N/A  8e. Social Security  8f. Other government assistance that you regularly receive Include cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income  8g. \$ 0.00 \$ N/A  8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/A  10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00  2 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies			Vision Pretax			\$	6.6	66	\$_			N/A	
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 451.87 \$ N/A  7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 1,772.40 \$ N/A  8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$ 0.00 \$ N/A  8d. Unemployment compensation  8d. \$ 0.00 \$ N/A  8d. Unemployment compensation  8d. \$ 0.00 \$ N/A  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (hendrist under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income  8g. \$ 0.00 \$ N/A  8g. Pension or retirement income  8g. \$ 0.00 \$ N/A  9g. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9g. \$ 0.00 \$ N/A  10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9g. \$ 0.00 \$ N/A  11. +\$ N/A  12. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  13. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00  Combined			Employee Life			\$	4.6	35	\$			N/A	
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8a. Net income from 'ental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8d. \$ 0.00 \$ N/A  8e. \$ 0.00 \$ N/A  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  8g. Pension or retirement income  8g. \$ 0.00 \$ N/A  8h. Other monthly income. Specify:  8f. \$ 0.00 \$ N/A  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/A  10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	1,772.4	10	\$_		I	N/A	
10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J.  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  Combined		8c. 8d. 8e. 8f.	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income	8t 8d 8d 8d	o. d. e.	\$_ \$_ \$_ \$_ \$_	0.0 0.0 0.0 0.0	00 00 00 00 00 00	\$_ \$_ \$_ \$_			N/A N/A N/A N/A	
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Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$ 0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  Combined	10.	Calo	culate monthly income. Add line 7 + line 9.	10.	\$		1.772.40 +	\$		N/A	= 5	3	1.772.40
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Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12.   14.   Combined	11.	Inclu othe Do r	ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not	dep			•		·	Schedule			0.00
Combined	12.	Writ	te that amount on the Summary of Schedules and Statistical Summary of Certain								\$		1,772.40
		1.17											

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Debtor 1 Shakema Samone Lynch		Case number (if known)				
13. <b>Do</b>	you expect an inc	rease or decrease within the year after you file this form?				
	Yes. Explain:	Expecting about a 3 percent increase				

Debter 1 Shakema Samone Lynch   Shakema Samon	T-HII	in this informs	tion to identify y	2115 00001			•		
Debtor 2 (Spouse, If filing)    An amended filing   An applement showing posphelition chapter   13 expenses as of the following date:   MM / DD / YYYYY   MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYY    MM / DD / YYYYYYYYYYY									
Debtor 2   Copoure, ## filling)	Deb	tor 1	Shakema Sa	mone Ly	nch				
United States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA  Case number (It known)  Official Form 106J  Schedule J: Your Expenses  Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. In more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (If known), Answer every question.  Part !: Describe Your Household  1. Is this a joint case?  No. Go to line 2.  Yes. Does Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  2. Do you have dependents?  No  Do not list Debtor 1 and Yes. Fill out this information for Debtor 2.  Do not list Debtor 1 and Debtor 2.  Do not state the dependents names.  Daughter  18 Yes.  Daughter  18 Yes.  Daughter  19 No  Daughter  19 No  Daughter  20 Yes No  No  Do your expenses include expenses as of your bankruptcy if ling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filled. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  The retail or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included any new ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4a. \$  0.00  4b. Property, homeowners's, or renter's insurance  4c. S 0.00  4d. Home maintenance, repair, and upkeep expenses  4c. S 0.00  4d. Home maintenance, repair, and upkeep expenses  4d. S 0.00  4d. Home maintenance, repair, and upkeep expenses  4d. S 0.00	Deb	tor 2					_	•	ving postpetition chapter
Case number (If known)    Continued   Cont	(Spo	ouse, if filing)					_ 1	3 expenses as of	the following date:
Official Form 106J Schedule J: Your Expenses  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part II   Describe Your Household	Unit	ed States Bankr	uptcy Court for the	: EASTE	RN DISTRICT OF NORT	TH CAROLINA		MM / DD / YYYY	
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    No. Go to line 2.									
East scomplete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    In this a joint case?   No. Go to line 2.   Yes. Does Debtor 2 live in a separate household?   No. Go to line 2.   Yes. Does Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.	Of	fficial Fo	rm 106J						
East scomplete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    In this a joint case?   No. Go to line 2.   Yes. Does Debtor 2 live in a separate household?   No. Go to line 2.   Yes. Does Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.	S	chedule	J: Your	Exper	ses				12/15
1. Is this a joint case?  No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  No. Go to line 2.  No. Do not list Debtor 1 and Pyes. Fill out this information for each dependent	Be info nur	as complete a ormation. If m mber (if know	and accurate as ore space is ne n). Answer ever	possible eded, atta ry questio	If two married people a				
No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  No. Go to line 2.  No. Do not list Debtor 1 and Go to line 4.  No. Go to list Debtor 1 and Go to line 4.  No. Go to line 2.  No. Do not state the dependents names.  Daughter  No. Daughter  No. Daughter  No. Daughter  No. Daughter  No. Daughter  No. No. Daughter  No.				ehold					
Yes. Does Debtor 2 live in a separate household?   No		_							
Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  2. Do you have dependents?   No   Do not list Debtor 1 and Debtor 2.  Do not state the dependents names.   Daughter   B   Yes   Daughter   Dau		_		in a separ	ate household?				
2. Do you have dependents?		□N	0	•					
Do not list Debtor 1 and Debtor 2.  Do not state the dependents names.  Doughter  Daughter  B  Daughter  B  Daughter  B  Daughter  Daugh		□ Ye	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expense</i>	es for Separate House	ehold of Debto	or 2.	
Do not list Debtor 1 and Debtor 2.  Do not state the dependents names.  Doughter  Daughter  B  Daughter  B  Daughter  B  Daughter  Daugh	2.	Do you have	e dependents?	П №					
Daughter    Daughter   18   Yes   No   No   Daughter   20   Yes   Yes   No   No   No   No   No   No   No   N			ebtor 1 and					•	
dependents names.    Daughter		Do not state	the						□ No
Daughter  Daught						Daughter		8	Yes
Daughter  Pes  Yes  No   No   No   No   No   No   No   No									□ No
Daughter						Daughter		18	
3. Do your expenses include expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. \$ 0.00  4d. Home maintenance, repair, and upkeep expenses  4d. \$ 0.00  4d. Homeowner's association or condominium dues						Doughton		20	
3. Do your expenses include expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4a. \$  0.00  4b. Property, homeowner's, or renter's insurance  4c. \$  0.00  4d. Homeowner's association or condominium dues  4d. \$  0.00  0.00						Daugnter			
3. Do your expenses include expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I</i> : Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4a. \$ 0.00  4b. Property, homeowner's, or renter's insurance  4c. \$ 0.00  4d. Homeowner's association or condominium dues  4d. \$ 0.00  0.00									
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Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I</i> : Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$  0.00  4d. Homeowner's association or condominium dues		•		han □					
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$  0.00  4d. Homeowner's association or condominium dues		yourself and	a your depende	nts? —	. 55				
the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  4. \$ 1,041.00  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$ 0.00  4d. Homeowner's association or condominium dues  4d. \$ 0.00	Est	imate your ex enses as of a	penses as of y	our bankr	uptcy filing date unless	you are using this for splemental Schedule	orm as a sup J, check the	plement in a Cha box at the top of	pter 13 case to report f the form and fill in the
4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues  Your expenses  4. \$ 1,041.00  4. \$ 0.00  40. \$ 0.00  41. \$ 0.00  42. \$ 0.00  43. \$ 0.00  44. \$ 0.00									
payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues  4. \$ 1,041.00				a nave inc	cluded it on S <i>chedule I</i> :	Your Income		Your expe	enses
4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. Homeowner's association or condominium dues  4d. \$  0.00  0.00  4d. \$  0.00	4.					Include first mortgag	e 4. \$		1,041.00
4b.Property, homeowner's, or renter's insurance4b.\$0.004c.Home maintenance, repair, and upkeep expenses4c.\$0.004d.Homeowner's association or condominium dues4d.\$0.00		If not includ	ed in line 4:						
4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$  0.00  0.00		4a. Real e	state taxes				4a. \$		0.00
4d. Homeowner's association or condominium dues 4d. \$ 0.00		•	•				•		
	5.					nome equity loans			

ebtor 1	Shakem	a Samone Lynch	Case num	ber (if known)	
	ities:			•	
6a.	•	, heat, natural gas	6a.	·	215.00
6b.		wer, garbage collection	6b.	\$	110.00
6c.	Telephon	e, cell phone, Internet, satellite, and cable services	6c.	\$	62.00
6d.	Other. Sp	ecify:	6d.	\$	0.00
Foo	d and hous	ekeeping supplies		\$	450.00
Chil	Idcare and	children's education costs	8.	\$	50.00
Clot	thing, laund	Iry, and dry cleaning	9.	\$	100.00
	-	products and services	10.	·	50.00
	-	ental expenses	11.		
		•	11.	Ψ	200.00
	-	Include gas, maintenance, bus or train fare.	12.	\$	250.00
		ar payments. clubs, recreation, newspapers, magazines, and books	13.	·	50.00
		tributions and religious donations	14.	Ф	0.00
	urance.				
		nsurance deducted from your pay or included in lines 4 or 20.	150	<b>c</b>	0.00
	. Life insura		15a.	·	0.00
	. Health ins		15b.	·	0.00
	. Vehicle in		15c.	· ·	200.00
15d.	. Other insu	urance. Specify:	15d.	\$	0.00
		nclude taxes deducted from your pay or included in lines 4 or 20.			
Spe	cify: <b>Prop</b>	erty Taxes	16.	\$	18.00
. Inst	allment or I	ease payments:			
17a.	. Car paym	ents for Vehicle 1	17a.	\$	488.00
17b.	. Car paym	ents for Vehicle 2	17b.	\$	0.00
17c.	. Other. Sp	ecify: Furniture Payments	17c.	\$	91.00
	. Other. Sp		17d.	\$	0.00
		of alimony, maintenance, and support that you did not report as		<b>—</b>	0.00
		your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
		s you make to support others who do not live with you.		\$	450.00
		thly payments to child in college	19.	·	100.00
		perty expenses not included in lines 4 or 5 of this form or on Sche		our Income	
		s on other property	20a.		0.00
	. Real esta		20b.	·	
				·	0.00
		homeowner's, or renter's insurance	20c.	·	0.00
		nce, repair, and upkeep expenses	20d.	·	0.00
20e.	. Homeowr	ner's association or condominium dues	20e.	\$	0.00
. Oth	er: Specify:		21.	+\$	0.00
0-1					
		monthly expenses		•	0.005.00
		through 21.		\$	3,825.00
22b.	. Copy line 2	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c.	. Add line 22	a and 22b. The result is your monthly expenses.		\$	3,825.00
					·
	-	monthly net income.		•	
		12 (your combined monthly income) from Schedule I.	23a.	·	2,601.39
23b.	. Copy you	r monthly expenses from line 22c above.	23b.	-\$	3,825.00
23c.		our monthly expenses from your monthly income.	00-	e e	_1 222 64
	The result	t is your monthly net income.	23c.	\$	-1,223.61
_			<b>-</b>		
		an increase or decrease in your expenses within the year after yo			
		ou expect to finish paying for your car loan within the year or do you expect you	r mortgage	payment to increase	or decrease because of a
_		terms of your mortgage?			
	No.				
□Y	Yes.	Explain here:			

Fill in this in	formation to identify your	case:				ı		
Debtor 1		Shakema Samone Lynch						
	First Name	Middle Name	Last	Name				
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last	Name				
United States Bankruptcy Court for the:		EASTERN DISTRICT OF NORTH CAROLINA						
Case number								
(if known)						_	Check if this is an amended filing	
Official Fo	orm 106Dec							
Declar	ation About a	ın Individua	al Debto	r's Sche	dules		12/15	
years, or both	ney or property by fraud in n. 18 U.S.C. §§ 152, 1341, 1 Sign Below				•		·	
Did you	pay or agree to pay some	one who is NOT an att	torney to help	ou fill out bankru	uptcy forms?			
■ No								
☐ Yes	s. Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)				
	enalty of perjury, I declare are true and correct.	that I have read the su	ımmary and sc	hedules filed with	h this declarat	ion and		
X /s/ S	Shakema Samone Lyncl	h	х					
	kema Samone Lynch ature of Debtor 1			Signature of Debto	or 2			
Date	January 8, 2019			Date				

Fil	l in this inform	ation to identify you	r case:			
De	ebtor 1	Shakema Samo				
De	btor 2	First Name	Middle Name	Last Name		
(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Banl	kruptcy Court for the:	EASTERN DISTRICT OF	NORTH CAROLINA		
1	nse number				_	Check if this is an amended filing
	fficial For		Affairs for Individ	luals Filing for B	ankruptcy	4/1
info	ormation. If mo		ible. If two married people a , attach a separate sheet to stion.			
Pa	rt 1: Give De	etails About Your M	arital Status and Where You	Lived Before		
1.	What is your	current marital stat	us?			
	☐ Married					
	■ Not marri	ied				
2.	During the las	st 3 years, have you	lived anywhere other than v	where you live now?		
	□ No		•	·		
		all of the places you	lived in the last 3 years. Do no	ot include where you live nov	٧.	
	Debtor 1 Price	or Address:	Dates Debtor 1	Debtor 2 Prior Ac	ldress:	Dates Debtor 2
			lived there	_		lived there
	3008 Folkes Raleigh, NO		From-To: <b>November 20</b> 1 to January 20		1	☐ Same as Debtor 1 From-To:
	■ No □ Yes. Mak	es include Arizona, Ca	ver live with a spouse or leg alifornia, Idaho, Louisiana, Nev hedule H: Your Codebtors (Of	vada, New Mexico, Puerto R		
Pa	rt 2 Explain	the Sources of You	ır Income			
4.	Fill in the total	amount of income yo	mployment or from operating ou received from all jobs and a have income that you receive	all businesses, including part	-time activities.	endar years?
	□ No					
	Yes. Fill i	n the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	r last calendar anuary 1 to Dec	year: ember 31, 2018 )	■ Wages, commissions, bonuses, tips	\$50,893.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

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Debtor 1 Shakema Samone Lynch			Case number (if known)					
				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
		ar year be December		■ Wages, commissions, bonuses, tips	\$12,888.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
For the (		ar year: December	31, 2016 )	■ Wages, commissions, bonuses, tips	\$12,254.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
winn	ings. İi each s No	you are fil	ing a joint ca	pensions; rental income; inter se and you have income that y ome from each source separat	ou received together, list it o	only once under De	ebtor 1.	d gambling and lottery
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Part 3:	List	Certain Pa	yments You	Made Before You Filed for I	Bankruptcy			
_	No.	Neither Deindividual   During the	ebtor 1 nor I primarily for a 90 days before Go to line 7 List below paid that control include	P's debts primarily consumer Debtor 2 has primarily consumer a personal, family, or household pre you filed for bankruptcy, die ach creditor to whom you paireditor. Do not include payment payments to an attorney for the ton 4/01/19 and every 3 years	Imer debts. Consumer debtald purpose."  d you pay any creditor a total d a total of \$6,425* or more into the for domestic support obligates bankruptcy case.	Il of \$6,425* or mo in one or more pay gations, such as ch	re? /ments and tl nild support a	he total amount you and alimony. Also, do
	Yes.			or both have primarily consu ore you filed for bankruptcy, di		l of \$600 or more?	<b>,</b>	
		■ No.	Go to line 7	7.				
		□ Yes	List below include pay	each creditor to whom you pai ments for domestic support ol r this bankruptcy case.				
Cre	ditor's	Name and	d Address	Dates of payme	nt Total amount	Amount you	Was this p	payment for

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Case number (if known)

Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο Yes. List all payments to an insider. Amount you **Insider's Name and Address** Dates of payment Total amount Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Total amount Amount you Reason for this payment Dates of payment still owe Include creditor's name paid Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Troy Capital LLC v. Shakema Collection **Wake County District Court** Pending Samone Lynch 316 Fayetville St □ On appeal 18 CVD 12678 Raleigh, NC 27601 □ Concluded Charged off debt to Carolina Finance Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? Nο П Yes

Debtor 1 Shakema Samone Lynch

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Del	btor 1	Shakema Samone Lynch			Case number (	if known)	
Pa	rt 5:	List Certain Gifts and Contributio	ns				
13.	■ N	0	ruptcy, d	id you give any gifts with a total val	ue of more th	an \$600 per person'	?
		es. Fill in the details for each gift.  with a total value of more than \$6	600	Describe the gifts		Dates you gave	Value
	per p	erson on to Whom You Gave the Gift an				the gifts	
	Addre		u				
14.	Within		ruptcy, d	id you give any gifts or contribution	ns with a total	value of more than	\$600 to any charity?
		es. Fill in the details for each gift or				<b>-</b>	
	more Chari	or contributions to charities that than \$600 ty's Name  SS (Number, Street, City, State and ZIP Co		Describe what you contributed		Dates you contributed	Value
Pai	rt 6:	List Certain Losses					
15.	or gan	nbling?	uptcy or	since you filed for bankruptcy, did y	ou lose anyth	ning because of thef	it, fire, other disaster
		ribe the property you lost and	Describ	pe any insurance coverage for the lo	oss	Date of your	Value of property
	how t	the loss occurred	Include	the amount that insurance has paid. L	ist pending	loss	lost
			insuran	ce claims on line 33 of Schedule A/B:	Property.		
Pa	rt 7:	List Certain Payments or Transfe	rs				
16.	consu	Ited about seeking bankruptcy or	r preparin	d you or anyone else acting on your g a bankruptcy petition?  a, or credit counseling agencies for ser			rty to anyone you
	■ N						
		es. Fill in the details.		Barried and the second		D-1	A
	Addre Email	on Who Was Paid ess I or website address on Who Made the Payment, if Not	You	Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment
17.	promis Do not	sed to help you deal with your cru include any payment or transfer that	editors or	d you or anyone else acting on your to make payments to your creditor ed on line 16.		r transfer any prope	rty to anyone who
	■ N	es. Fill in the details.					
		on Who Was Paid		Description and value of any proptransferred	erty	Date payment or transfer was	Amount of payment
						made	
18.	transfe Include	erred in the ordinary course of your both outright transfers and transfers and transfers that you have a	our busine rs made a	s security (such as the granting of a se			
	_	es. Fill in the details.					
	Perso Addre	on Who Received Transfer ess		Description and value of property transferred		iny property or received or debts change	Date transfer was made
	Perso	on's relationship to you			oxe	9-	

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Within 10 years before you filed for bankruptey, did you transfer any property to a solf-cettled trust or similar device of which you are a

Debtor 1 Shakema Samone Lynch

Case number (if known)

19.	beneficiary? (These are often called asset-prote		у ргорену со а	sen-seme	u trust or similar device	or which you are	а
	Name of trust	Description and v	alue of the pro	perty trans	sferred	Date Transfer v	vas
Par	t 8: List of Certain Financial Accounts, Inst	truments, Safe Deposit	Boxes, and St	orage Unit	s		
20.	Within 1 year before you filed for bankruptcy.	, were any financial ac	counts or instr	uments he	ld in your name, or for y	our benefit, close	d,
	sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ	other financial accour	nts; certificates	of deposi		•	•
	■ No □ Yes. Fill in the details.						
		Last 4 digits of	Type of accou	unt or	Date account was	Last bala	nce
		account number	instrument		closed, sold, moved, or transferred	before closing trans	g or
21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository cash, or other valuables?					sitory for securitie	s,	
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, St State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit or	r place other than your	home within 1	year befor	re you filed for bankrupt	cy?	
	■ No						
	Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?	
Par	t 9: Identify Property You Hold or Control fo	or Someone Else					
23.	Do you hold or control any property that som for someone.	neone else owns? Inclu	ıde any proper	ty you bor	rowed from, are storing	for, or hold in trus	st
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Va	alue
Par	t 10: Give Details About Environmental Infor	,					
For	the purpose of Part 10, the following definition	ns apply:					
	Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these s	e air, land, soil, surface	water, ground				or
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,						

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Shakema Samone Lynch

Case number (if known)

24.	24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of an	ny release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or admir	nistrative proceeding under any envi	ronmental law? Include settlements	and orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	11: Give Details About Your Business or Co	nnections to Any Business						
27.	Within 4 years before you filed for bankruptcy	, did you own a business or have an	y of the following connections to any	/ business?				
	☐ A sole proprietor or self-employed in a	a trade, profession, or other activity,	either full-time or part-time					
	☐ A member of a limited liability compan	y (LLC) or limited liability partnershi	ip (LLP)					
	☐ A partner in a partnership							
	☐ An officer, director, or managing exec	utive of a corporation						
	☐ An owner of at least 5% of the voting of	or equity securities of a corporation						
	■ No. None of the above applies. Go to Par	rt 12.						
	☐ Yes. Check all that apply above and fill in	the details below for each business	<b>3.</b>					
	Business Name D Address	Describe the nature of the business	Employer Identification number Do not include Social Security					
	(Number, Street, City, State and ZIP Code)	lame of accountant or bookkeeper	Dates business existed					
28.	Within 2 years before you filed for bankruptcy institutions, creditors, or other parties.	, did you give a financial statement t		ude all financial				
	■ No							
	Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)	Pate Issued						

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Deptor	Snakema Samone Lynch		Case number (if known)	
Part 12	Sign Below			
are true		king a false statement, concealing	hments, and I declare under penalty of perjury that th property, or obtaining money or property by fraud in or up to 20 years, or both.	
/s/ Sha	akema Samone Lynch			
	ma Samone Lynch ure of Debtor 1	Signature of Debte	or 2	
Date	January 8, 2019	Date		
Did you ■ No □ Yes	attach additional pages to Your St	atement of Financial Affairs for In	dividuals Filing for Bankruptcy (Official Form 107)?	
Did you ■ No	pay or agree to pay someone who	is not an attorney to help you fill	out bankruptcy forms?	
☐ Yes.	Name of Person Attach the E	Bankruptcy Petition Preparer's Notice	e, Declaration, and Signature (Official Form 119).	

Fill in this information to ident	ify your case:		
Debtor 1 Shakema	Samone Lynch		
First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing) First Name	Middle Name	Last Name	
United States Bankruptcy Court	for the: EASTERN DISTF	RICT OF NORTH CAROLINA	
Case number			
(if known)			☐ Check if this is an amended filing
Official Form 108			
	ention for Indiv	iduals Filing Under Chapte	e <b>r 7</b> 12/15
If you are an individual filing un  ■ creditors have claims secur  ■ you have leased personal po  You must file this form with the  whichever is earlier, to  on the form	ed by your property, or operty and the lease has no court within 30 days after		t for the meeting of creditors, e creditors and lessors you list
If two married people are filing sign and date the forr		oth are equally responsible for supplying correct in	formation. Both debtors must
	s possible. If more space is case number (if known).	s needed, attach a separate sheet to this form. On t	the top of any additional pages,
	Vho Have Secured Claims	Or Craditors Who Have Claims Secured by Dranarty	(Official Form 106D) fill in the
information below.	ted in Part 1 of Schedule L	D: Creditors Who Have Claims Secured by Property	(Official Form 106D), fill in the
Identify the creditor and the p	roperty that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's <b>Fidelity Invest</b> name:	ments	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of 401k		☐ Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt:		■ Retain the property and [explain]:  No action required	_
Creditor's <b>Progressive L</b> name:	easing	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of Queen size	matress	Retain the property and enter into a Reaffirmation Agreement.	Yes
property securing debt:		☐ Retain the property and [explain]:	_
Creditor's Santander Conname:	nsumer USA	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of 2015 GMC	Terrain 34196 miles	Retain the property and enter into a	■ Yes

Official Form 108

property

Statement of Intention for Individuals Filing Under Chapter 7

Reaffirmation Agreement.

☐ Retain the property and [explain]:

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Debto	Shakema Samone Lynch	Case number (if known)
sec	uring debt:	
in the i	y unexpired personal property lease that you listed in So	chedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill red leases are leases that are still in effect; the lease period has not yet ended. rustee does not assume it. 11 U.S.C. § 365(p)(2).
Descr	ibe your unexpired personal property leases	Will the lease be assumed?
	r's name: iption of leased rty:	□ No
	r's name: iption of leased rtv:	□ No
Lesso	r's name: iption of leased	□ No □ Yes
	r's name: iption of leased rty:	□ No
	r's name: iption of leased rty:	□ No
	r's name: iption of leased rty:	□ No
	r's name: iption of leased rty:	□ No
	Sign Below	□ 165
	penalty of perjury, I declare that I have indicated my inte ty that is subject to an unexpired lease.	ention about any property of my estate that secures a debt and any personal
S	s/ Shakema Samone Lynch Shakema Samone Lynch Signature of Debtor 1	XSignature of Debtor 2

Date

Date

January 8, 2019

Fill i	n this information to identify your cas	se:					lirected in this form and	in Form
Deb	stor 1 Shakema Samone L	_ynch		122	2A-1Supp:			
	otor 2			•	1. There	e is no pres	umption of abuse	
	red States Bankruptcy Court for the:	Eastern District of North Ca	arolina	[	appl	ies will be r	o determine if a presul nade under <i>Chapter 7</i> icial Form 122A-2).	
(if kno	e number 			—     <sub>r</sub>	_	,	does not apply now be	acause of
							service but it could ap	
					☐ Check	if this is a	n amended filing	
Off	ficial Form 122A - 1							
Ch	apter 7 Statement o	of Your Current	Mor	nthly Inc	ome			12/1
attacl case qualif Part	s complete and accurate as possible. If ha separate sheet to this form. Include number (if known). If you believe that stying military service, complete and file ta:  Calculate Your Current Mc What is your marital and filing st	e the line number to which the you are exempted from a presue Statement of Exemption from onthly Income	addition umption	nal information a of abuse because	pplies. On se you do i	the top of a not have pri	ny additional pages, wri narily consumer debts o	te your name and or because of
	■ Not married. Fill out Column A,	lines 2-11.						
	$\square$ Married and your spouse is fil	ling with you. Fill out both C	olumns	A and B, lines	2-11.			
	☐ Married and your spouse is N	OT filing with you. You and	l your s	spouse are:				
	☐ Living in the same househo	old and are not legally sepa	rated.	Fill out both Col	umns A a	nd B, lines	2-11.	
	☐ Living separately or are leg penalty of perjury that you ar living apart for reasons that of	nd your spouse are legally se	parated	d under nonban	kruptcy lav	w that appli	es or that you and you	
10 th	ill in the average monthly income that of 01(10A). For example, if you are filing on the 6 months, add the income for all 6 months ouses own the same rental property, put	September 15, the 6-month perion this and divide the total by 6. Fill	od would in the re	be March 1 throusult. Do not include	igh August le any incor	31. If the amo	ount of your monthly incon ore than once. For examp	ne varied during ble, if both
					Column A Debtor 1	l	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, b payroll deductions).	onuses, overtime, and con	nmissio	ons (before all	\$	5,488.85	\$	
3.	Alimony and maintenance payme Column B is filled in.	ents. Do not include paymen	ts from	a spouse if	\$	0.00	\$	
4.	All amounts from any source wh of you or your dependents, inclu from an unmarried partner, membe and roommates. Include regular co filled in. Do not include payments y	ding child support. Include ers of your household, your de entributions from a spouse on	regular epende	contributions nts, parents,	\$	0.00	\$	
5.	Net income from operating a bus	siness, profession, or farm	Dal	otor 1				
	Cross resoints (hefers all deduction	ns) \$	0.00	olor i				
	Gross receipts (before all deduction Ordinary and necessary operating of		0.00					
	Net monthly income from a busines			Copy here ->	\$	0.00	\$	
6.		· · · · —						
		,	Deb	otor 1				
	Gross receipts (before all deduction	ns) \$	0.00					
	Ordinary and necessary operating	expenses -\$	0.00					
	Net monthly income from rental or	other real property \$	0.00	Copy here ->	\$	0.00	\$	

Official Form 122A-1

7. Interest, dividends, and royalties

0.00

Case number (if known)

Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead. list it here: 0.00 \$ For your spouse 9. Pension or retirement income. Do not include any amount received that was a 0.00 \$ benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. \$ 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 11. Calculate your total current monthly income. Add lines 2 through 10 for 5.488.85 5,488.85 \$ \$ each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 5,488.85 Multiply by 12 (the number of months in a year) **x** 12 65,866.20 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: NC Fill in the state in which you live. Fill in the number of people in your household. 4 82,994.00 Fill in the median family income for your state and size of household. 13. \$ To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? 14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2. Part 3: By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Shakema Samone Lynch **Shakema Samone Lynch** Signature of Debtor 1 Date January 8, 2019 MM / DD / YYYY If you checked line 14a, do NOT fill out or file Form 122A-2. If you checked line 14b, fill out Form 122A-2 and file it with this form.

Shakema Samone Lynch

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Debtor 1 Shakema Samone Lynch

Case number (if known)

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 07/01/2018 to 12/31/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employer: Hill-Rom Manufacturing

Constant income of \$5,488.85 per month.\*

Debtor 1 Shakema Samone Lynch

Case number (if known)

### \*Paycheck Details:

### Hill-Rom Manufacturing

Date	Earnings	Overtime	Taxes	Other	Net Check
2018-07-06	2,224.27	0.00	224.73	218.23	1,781.31
2018-07-20	2,224.27	0.00	224.72	218.23	1,781.32
2018-08-03	2,224.27	0.00	224.72	218.23	1,781.32
2018-08-17	2,224.27	0.00	224.73	218.23	1,781.31
2018-08-31	2,224.27	0.00	224.71	218.23	1,781.33
2018-09-14	2,224.27	0.00	224.73	218.23	1,781.31
2018-09-28	2,224.27	0.00	224.73	218.23	1,781.31
2018-10-12	2,224.27	0.00	226.05	227.15	1,771.07
2018-10-26	2,224.27	0.00	224.71	227.15	1,772.41
2018-11-09	2,224.27	0.00	227.05	227.15	1,770.07
2018-11-23	2,224.27	0.00	224.73	227.15	1,772.39
2018-11-30	4,017.60	0.00	1,416.21	0.00	2,601.39
2018-12-07	2,224.27	0.00	224.72	227.15	1,772.40
2018-12-21	2,224.27	0.00	224.73	227.15	1,772.39
Totals:	32,933.11	0.00	4,341.27	2,890.51	25,701.33

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	r 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
_	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-00070-5-DMW Doc 1 Filed 01/08/19 Entered 01/08/19 09:44:59 Page 54 of 56

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court Eastern District of North Carolina**

In 1	e Shakema Samone Lynch		Case No.				
	•	Debtor(s)	Chapter	7			
	DISCLOSURE OF COMPE	ENSATION OF ATTOR	NEY FOR DE	EBTOR(S)			
1.	compensation paid to me within one year before the fill	ant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that ensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to idered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
	For legal services, I have agreed to accept			950.00			
	Prior to the filing of this statement I have received		\$	0.00			
	Balance Due		\$	950.00			
2.	The source of the compensation paid to me was:						
	☐ Debtor ☐ Other (specify):						
3.	The source of compensation to be paid to me is:						
	☐ Debtor ☐ Other (specify): <b>Hyatt</b>	Legal Services					
4.	■ I have not agreed to share the above-disclosed com	I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law to					
	☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na						
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	<ul><li>a. Analysis of the debtor's financial situation, and rend</li><li>b. Preparation and filing of any petition, schedules, state.</li><li>c. Representation of the debtor at the meeting of credit</li><li>d. [Other provisions as needed]</li></ul>	tement of affairs and plan which	may be required;				
6.	By agreement with the debtor(s), the above-disclosed for	ee does not include the following	service:				
		CERTIFICATION					
this	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	ny agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in			
	January 8, 2019	/s/ Daniel T. Colen	nan				
_	Date	Daniel T. Colemar Signature of Attorney Law Office of Dan 4030 Wake Forest Raleigh, NC 27609 919-881-9988	i 15812 iel T. Coleman Rd., Ste 300				
		devay@bellsouth.  Name of law firm	net				

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### **United States Bankruptcy Court** Eastern District of North Carolina

	Eastern District of North Carolin	ıa	
In re Shakema Samone Lynch		Case No.	
	Debtor(s)	Chapter	7
VEDIE	ICATION OF CREDITOR	MATDIY	
VERIF	ICATION OF CREDITOR	MAIKIA	
Γhe above-named Debtor hereby verifies tha	at the attached list of creditors is true and o	correct to the best	of his/her knowledge.
Date: January 8, 2019	/s/ Shakema Samone Lynch		
	Shakema Samone I ynch		

Signature of Debtor

Capital Accounts P.O. Box 140065 Nashville, TN 37214 Foxhall Village 5909 Foxhall Village Rd Raleigh, NC 27616 Verizon Wireless PO Box 660108 Dallas, TX 75266-0108

Capital One Bank 1680 Capital One Bank Mc Lean, VA 22102-3407

National General Insurance 5630 University Pkwy Winston Salem, NC 27105 Xstream Travel Suite 245 101 C North Greenville Allen, TX 75002

Carolina Finance 1513 Walnut St., Ste 150 Cary, NC 27511 Navient PO Box 9500 Wilkes Barre, PA 18773 Zoca Loans P. O. Box 1147 27565 Research Park Dr. Mission, SD 57555

Chisholm Chiropractic Center 301 Glenwood Avenue, Ste. 200 Raleigh, NC 27613 NPRTO South-East, LLC 256 West Data Drive Draper, UT 84020

CreditOne Bank
PO Box 60500
City of Industry, CA 91716-0500

Piedmont Finance CNCC 5101 New Bern Ave Raleigh, NC 27610

Duke Health 5213 S. Alston Durham, NC 27713 Progressive Leasing 10619 South Jordan Gateway Ste 100 South Jordan, UT 84095

Fidelity Investments Boston, MA 02109 Santander Consumer USA P.O. Box 961245 Fort Worth, TX 76161

First Premier Bank 601 S. Minnesota Ave Sioux Falls, SD 57104 Sessoms & Rogers, PA - V. Monroe P.O. Box 110564 Durham, NC 27709

Firstpoint Collect Resources P.O. Boz 26140 Greensboro, NC 27402-6140 Troy Capital, LLC 2660 S Rainbow Blvd # D104, Las Vegas, NV 89146